

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO.

FILING DATE

APPLICANT(S)

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		CLAIMS
	IND	DEP	IND	DEP	IND	DEP	
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TOTAL IND.	1	8					
TOTAL DEP.		38					
TOTAL CLAIMS	39						

CLAIMS	IND		DEP		IND		DEP		IND		DEP	
	IND	DEP										
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